

State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619)

07 FEB - 6 AM 10: 47

STATE OF IDAHO

(Type or print clearly in black ink) ee instructions at bottom of page

Lobbyist's name and permanent business address Period covered Date prepared month ending Andrea K. Mihm 2/2/07 **SULLIVAN & REBERGER** (Day) (Yr.) (Mo.) PO BOX 1703 **BOISE ID 83701** Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure ursed Personal Living and Travel ses Pertaining to Lobbying Activity Do Not Have to be Reported \* Total Amount for liem 3, at bottom of page.) **All Employers** Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services 0.00 0.00 **Total** \*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amo The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office. Date Names of Legislators & Public Officials in Group Place Amount Continued on attached page(s) Employer(s) Name(s) and Address(es) INSTRUCTIONS No.1 ADVANTAGE WORKER COMPENSATION Who should file this form: Any lobbyist registered under Section PO Box 571918, SLC, UT 84157 67-6617 Idaho Code. No.2 ASSOCIATED GENERAL CONTRACTORS Fling deadline: Monthly reports due within ten (10) days of the 110 N. 27th, Boise, ID 83702 month for activities of the past month. TO BE FILED WITH: No.3 BATELLE ENERGY ALLIANCE Ben Ysursa PO Box 1625, Id. Falls, ID 83415 Secretary of State PO Box 83720 No.4 CLEAR SPRINGS FOODS Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 PO BOX 712. BUHL. ID 83316



State of Idaho

Ben Y sursa Secretary of State To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page of Page(s)

See instruction	s at bottom of page				1				
Lobbyist's name and permanent busin			Date p	repared		Period covered			
Patrick J. Sullivan						month ending			
SULLIVAN & REBERGER	<b>L</b>		1	2 12/07		a			
PO BOX 1703			1	2/2/07		(Mo.) (Day) (Yr.)			
BOISE ID 83701				•		1 31 01			
Totals of all reportal	ble expenditures made o	r incurred by Lobb	yist or by	Lobbyist's Employer	on behalf o	of Lobbyist's Employer.			
Category of Expenditure				buted by each employer	(identify en	mployers, under			
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	* Total Amount for All Employers	liem 3, at bottom				- Jan			
Do Not Have to be Reported	All Languoyers	Employer No	O, E	mployer No. 6 E	imployer N	Employer No 8			
Entertainment Food and Refreshment	s	\$	s_	s.	93.	32 \$			
Living Accommodations			_ -						
Advertising			_						
Travel	-9/11		_ -						
Telephone	- Phon		_ -						
Other Expenses or Services	1 / / /		-		. 7.	<del>-</del> -			
Total	\$0.00	5_6	<u>_</u> ,s.	8	933	_			
*When the number of employer	I s you are reporting for requ	l ires multiple L-3 for	ms to be file	) ed a total amount for all e	employers sh	ould be entered on Page 1.			
Hem The totals of each expen	diture of more than fifty	dollars (\$50) for a	legislator	or other holder of put	dic office.				
2 Date	Place	Aı	nount	Names of Leg	gislators & P	ublic Officials in Group			
		Ī							
		İ							
		1							
		ļ		1					
Continued on attached page(s	)		Item	<u> </u>					
INS	TRUCTIONS		3_	Employ	er(s) Name(s	s) and Address(es)			
			5, Ct	12M-WG IDAHO I	TC				
Who should file this form: A 67-6617 Idaho Code.	Any lobbyist registered	ander Section		Box 1625, Idaho		83417			
Pline deadline: Monthly m	ports due within ten (16	0) days of the	6200	ORRECTIONAL N	MEDICAL	SERVICES			
	Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.				12647 Olive Blvd., St. Louis, MO 63141				
TO BE FILED WITH:			O. EI	I LILLY CORPOR	RATION				
	Ben Ysursa		• / /			St. Paul MN 55103			
1	retary of State D Box 83720		ľ.—						
Boise	ID 83720-0080		* 7	MC Corporation					
Phone: (208) 334	-2852 Fax: (208) 334-7	2282	<sup>9</sup> 1101 Pennsylvania #325. Washington DC 20004						



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619) Page 3 of Page(s)
THIS SPACE FOR OFFICE USE ONLY

			learly in black ink) at bottom of page									
Lobbyi	it's name and p	permanent busine				Date	prepared			Period	covered	
Andrea K. Mihm							1 1	_		•	month e	nding
SUL	LIVAN & F	REBERGER					2/2/0	) [		Ma	(Dow)	(V+)
PO E	3OX 1703					1 1 1 2 1					(Yr.)	
BOIS	E ID 8370	)1				<u> </u>	-			1	101	101
Item 1	Totals	of all reportab	le expenditures made or	incurred by	Lobbyis	t or by	y Lobbyist's Emplo	oyer on t	ehalf o	f Lobb	yist's Empl	oyer.
	stegory of Ex		* Total Amount for	Proportions Item 3, at 1			ributed by each empl	loyer ( <b>id</b> e	stify es	objoles	, under	
Expenses		obbying Activity	All Employers		er No. C	-	Employer No. /	Empl	oyer N	n //	Emplo	yer Ny 2
	inment			Lampioy	CI 140. C	4	Ziipioyei (vo. /C	Linp	-		campio	yei ivy 2
	miniscin and Refreshm	nent	\$	s		_ \$		\$/0	15.	90	\$	
Living	Accommod	ations	. /					İ				
	· ·		NV			-  -						
Adver	DSING		- JANOY			-1 -						
Travel			1 1			1						
Teleph	one		77			-  -						
Out	<b>~</b>	<b>.</b>				-  -						
Ounce	Expenses or	Services				-1 -				יטבו		
		Total	s 0.00	s	0.00	s	0.00	s_/	75		\$	0.00
	via					-1.		ł				
Îtem			you are reporting for requi							ould be	entered on P	age 1.
2	Date		Place		Ато					ublic Of	ficials in Gro	жер
				l								
				1								
				1								
				I			1					
ᆫᆜ	Continued on	attached page(s)				******						
į		INST	RUCTIONS		L	Hem 3	Ea	aplo <del>yer</del> (s)	Name(s	s) and A	idress(cs)	
					4	GI	HS Data Mana	gemen	t			
	<b>io should fil</b> 6617 Idaho (		ny lobbyist registered u	mder Sectio	n [/		Commerce D			gusta	ME 0433	32-1090
						M	OTION PICTU	RF AS	SIN	f AMF	RICA	
		<ul> <li>Monthly replications of the past</li> </ul>	ports due within ten (10 month.	) days of th		MOTION PICTURE ASS'N of AMERICA 1600 Eye Str NW, Washington DC 20006						
TO	BE FILED	with.			ľ		LU TI CTATE	10000	LATE		V	
"	OU PILED	В	en Ysursa		j		ULTI-STATE / 15 King Str., #				22214	
1			ctary of State		-		io rang ou., w	~~, ~u	-AdiiU	iiid V/	. 22314	
			Box 83720 ID 83720-0080		1	1	WEST HEAR					ASS'N
L	Pho	ne: (208) 334-	2852 Fax: (208) 334-2	282	1/2	PO Box 2016. Edmonds. WA 98020-9516						



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

3 LOBBYISTS (Sec. 67-6619)

Page of Page(s)
THES SPACE FOR OFFICE USE ONLY

	31 07 byist's Employer.				
SULLIVAN & REBERGER PO BOX 1703 BOISE ID 83701  Item  Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobb  Category of Expenditure Reimbarsof Personal Living and Towel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported  * Total Amount for All Employers  Employer No.	byist's Employer.				
BOISE ID 83701	31 07 byist's Employer.				
BOISE ID 83701	31 07 byist's Employer.				
BOISE ID 83701	rs, suder				
Category of Expenditure Raimbursed Personal Living and Turvel  Expenses Pertaining to Lobbying Activity Do Not Have to be Reported  * Total Amount for All Employers  Entertainment Food and Refreshment  Living Accommodations  Advertising  Travel  * Total Amount for All Employers  * Total Amount for All Employers  * Total Amount for All Employers  * Total Amount for All Employer No. // Employer No	rs, suder				
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported  * Total Amount for All Employers  Employer No / 3 Employer No. // Employer					
Entertainment Food and Refreshment Living Accommodations Advertising Travel  Employer No.   3 Employer No.   5   5   5   5   5   5   5   5   5	Employer No/ 6				
Food and Refreshment Living Accommodations  Advertising  Travel					
Advertising Travel	\$				
Travel					
Telephone					
1 1 1					
Other Expenses or Services					
Total \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$0.00				
"When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be	e catered on Page 1.				
Item The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office.					
2 Date Place Amount Names of Legislators & Public O	fficials in Group				
Continued on attached page(s)					
INSTRUCTIONS Idean Employer(s) Name(s) and A	Address(es)				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.  PNGC (Pacific N'West Generating 711 NE Halsey #200, Portland, Of OWEST Communications	Cooperative) R 97232				
Filling deadline: Monthly reports due within ten (10) days of the month for activities of the past month.    Y   QWEST Communications   999 Main Str., 11th Fl., Boise ID   100   10	83702				
TO BE FILED WITH:  Ben Ysursa Secretary of State  Ben Ysursa Secretary of State  5 SOUTHEST IDAHO ENERGY 71 Goldens Bridge, Katoneh, NY	5 SOUTHEST IDAHO ENERGY 71 Goldens Bridge, Katoneh, NY 10536				
PO Box 83720  Boise, ID 83720-0080  Phone: (208) 334-2852 Fax: (208) 334-2282  TNT Fireworks  16526 Shore Dr., NE. Lake Fores	10536				



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619)

			early in black ink) at bottom of page						
Lobbyis	t's name and p	permanent busine			Date p	repared		Period co	vered
Andr	ea K. Mihr	n							month ending
SULI	LIVAN & R	EBERGER				2/2/67		260	(D-) (Ye)
PO B	OX 1703					0/0/01		(Ma.)	(Day) (Yr.)
	E ID 8370	)1							121 01
Hem 1	Totals	of all reportab	le expenditures made or	incurred by Lobby	rist or by	Lobbyist's Employer	on behalf	of Lobbyi	st's Employer.
Reimburs	tegory of Ex ed Personal Livi Pertaining to Le		* Total Amount for	Proportionate amo Item 3, at bottom		ibuted by each employer	( <b>identify</b> e	mployers,	under
	Not Have to b		All Employers	Employer No.	/7 E	imployer No. /8	Employer N	to 19	Employer No. 2
	ninment and Refreshm	nent	s	\$	\$_	s	93	之	s
Living	Accommod	ations							
Advert	tising		- P.A		_ _				
Travel			100						
Teleph	one		\ //						
Other l	Expenses or	Services							
		Total	\$ 0.00	5 6	s	8	93	33	. D
	137ham eka	h				ad a state of the			Annual and Phone I
Item			you are reporting for requi					iiotid be en	acieu da rage 1.
2	Date		Place	An	ount	Names of Le	gislators & l	Public Offic	ials in Group
				-					
				l					
				1					
				I					
	Continued on	attached page(s)		I		1			
			RUCTIONS		Item 3	Emplo	yer(s) Name	(s) and Add	ress(es)
<u> </u>					T~	ans Canada			
•	io should fil 6617 Idaho (		ny lobbyist registered u	ınder Section		00 SW 5th Avenu	ıe, #900,	Portlan	d, OR 97201
		: Monthly repities of the past	ports due within ten (10 t month.	) days of the	5 (/)	S TOBACCO 801 Pennsylvania	#900, D	enver C	O 80203
m	BE FILED	WITH:			ســــ ۱۸۷ الأم	ASHINGTON GR	OUP IN	ריו	
"		В	ien Ysursa	•		45 Crystal Dr., #			A 22202
			etary of State Box 83720		~ h				
	**	Boise,	ID 83720-0080	202		ACKSON OIL CO		lion ID (	22642
	Pho	uc: (208) 334-	2852 Fax: (208) 334-2	404	- 34	150 Commercial (	JL. Menc	nan IIJ 8	0.0042



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page of Page(s)
THES SPACE FOR OFFICE USE ONLY

			s at bottom of page				1			
Lobbyis		ermanent busin			De	ate prepared	***************************************	Period c	overed	
Andr	ea K. Mihr	n			- [				month endi	ng
SULI	LIVAN & R	EBERGER				21718	1	(Mo.)	(Day)	(Yr.)
PO E	3OX 1703				1	2/2/0	)	(MO.)		$\lambda \mathcal{I}$
	SE ID 8370	)1							31	<u> </u>
Item 1	Totals	of all reportat	ole expenditures made or	incurred by Lo	bbyist o	r by Lobbyist's Empl	oyer on behalf	of Lobby	ist's Employ	cr.
Reimburs	stegory of Ex ed Personal Livi		* Total Amount for	Proportionate as Item 3, at botte		ontributed by each emp ge.)	loyer ( <b>Identify</b> e	mployers	, under	
	Not Have to b		Ali Employers	Employer N	62/	Employer No. 2	Employer l	10.73	Employe	No27
	ainment and Refreshm	ent	\$	\$		\$	\$		\$	
Living	Accommodi	ations	<del></del>						***************************************	-
Advert	tising									
Travel			Nort							
Teleph	one		1000							
Other !	Expenses or	Services			_					
		Total	\$	s		s_6	5_0		\$ 20	
*	When the num	ber of employer	s you are reporting for requi	ires multiple L-3 f	orms to b	e filed a total amount fo	i or all employers s	bould be e	entered on Page	e l.
Item 2		of each expend	liture of more than fifty					D-15- 00	Estate Comm	
	Date		Place		Amount	Names	of Legislators &	Poole On	iciais in Group	
		-								
				1						
	Continued on	attached page(s)	•	i		i				
					Ites		aployer(s) Name	(s) and Ad	ldress(es)	
		INST	TRUCTIONS						<del></del>	
	o should file 6617 Idaho (		any lobbyist registered u	ander Section	<b>9</b> 1.1	THOMSON MED 777 E. Eisenhov	OSTAT ver, Ann Art	or Mi	48108	
			ports due within ten (10	) days of the	322	AAA of OREGO	N/IDAHO	ID 927	04	
mo	nun Ior activi	ties of the pas	t month.		-	7155 W. Dentor	OL, DOISE,	ID 63/	U4	
то	BE FILED V		lan Vanna		233	IDAHO WHOLE				
		_	Ben Ysursa retary of State			1301 Pennsylva	nia #900, D	enver (	CO 80203	
		PC	Box 83720		211					
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282				282	34					

from table)  Lagislative Ideat, Number  Lagislative Ideat, Number  and Section Number  Amusements, games, addictics and sports  Banking, finance, credit and investments  Of Children, minors, youth, senior chizens  Of Church and religion  Of Consumer officies  Of C		Date Amount ·			Name of Legislator Receiving	or Benefited
	5 abject	or House Bill, the Lobbyist w Code Bill, Re	Resolution or other no supporting or o coolution or Other	r Ingialative activity in which pposing, Appropriation Bill Number	Code Subject  01 Agriculture, horticulture, flurning, and livestock  02 Assusements, genes, athletics and sports  03 Banking, finance, credit and investments  04 Children, minors, youth, senior citizens  05 Church and religion  06 Consumer affairs  07 Reology, carrinouncest, pollution, conservation, zoning, land and water use  08 Education  09 Elections, campaigns, voting, political parties  10 Equal rights, civil rights, minority affairs  11 Government, financing, taxation, revenue, budget, appropriations, bids, fiou, funds  12 Government, county  13 Government, foderal  14 Government, special districts	Code Subject 17 Health service, medicine, drugs and controlled substances, health insurance, heapthals 18 Higher education 19 Housing, construction, codes 20 Insurance (encluding health insurance) 21 Labor, salaries and wages, collective bargaining 22 Law enforcement, courts, judges, crimes, prisons 23 License, permits 24 Liquor 25 Manufacturing, distribution and services 26 Natural resources, forest and forest products, fisheries, mining and unining products 27 Public lands, parks, recreation 28 Social insurance, unemployment insurance, public assistance, workmen's compensation 29 Transportation, highways, streets and roads 30 Utilities, communications, televisions, radio, newspaper, power, CATV, gas

#### LOBBYIST MONTHLY REPORT FORM THIS SPACE FOR OFFICE USE ONLY To Be Filed By: State of Idaho LOBBYISTS Ben Ysursa (Sec. 67-6619) FEB -9 AM 9:39 Secretary of State (Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Period covered Date prepared month ending Andrea K. Mihm **SULLIVAN & REBERGER** (Mo.) (Day) PO BOX 1703 **BOISE ID 83701** Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Category of Expenditure Proportionate amounts contributed by each employer (Identify employers, under Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity **Total Amount for** Item 3, at bottom of page.) All Employers Do Not Have to be Reported Employer No. Employer No. 2-3 **Employer N** Employer N. 2 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services 0.00 0.00 0.00 0.00 Total \*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1. The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office. Names of Legislators & Public Officials in Group 2 Date Place Amount Continued on attached page(s)

(Yr.)

0.00

Item Employer(s) Name(s) and Address(es) INSTRUCTIONS THOMSON MEDSTAT Who should file this form: Any lobbyist registered under Section 777 E. Eisenhower, Ann Arbor MI 48108 67-6617 Idaho Code. 12 HOSPITAL CORPORATION OF AMERICA Filing deadline: Monthly reports due within ten (10) days of the One Park Plaza, Nashville, TN 37203 month for activities of the past month. TO BE FILED WITH: Ben Ysursa Secretary of State

PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282

<u> </u>	Dele Amount		Name of Legislator Receiving	or Benefited
or H		Appropriation Bill Number	LEGISLATIVE SUI  Code Subject  O1 Agriculture, horticulture, farming, and livestock  O2 Amusements, games, athletics and sports  O3 Banking, finance, credit and investments  O4 Children, minors, youth, senior citizens  O5 Church and religion  O6 Consumer affairs  O7 Ecology, environment, pollution, conservation, zoning, land and water use  O8 Education  O9 Elections, campaigns, voting, political parties  10 Equal rights, civil rights, minority affairs  11 Government, financing, tuxation, revenue, budget, appropriations, bids, fees, funds  12 Government, county  13 Government, ederal  14 Government, municipal  15 Government, special districts  16 Government, state	Code Subject  17 Health service, medicine, drugger and controlled substances, heal insurance, hospitals  18 Higher education  19 Housing, construction, codes  20 Insurance (excluding health insurance)  21 Labor, salaries and wages, collective bargaining  22 Law enforcement, courts, judges, crimes, prisons  23 License, permits  24 Liquor  25 Manufacturing, distribution and services  26 Natural resources, forest and forest products, fisheries, minimand mining products  27 Public lands, parks, recreation  28 Social insurance, unemployment insurance, public assistance, workmen's compensation  29 Transportation, highways, streets and roads  30 Utilities, communications, televisions, radio, newspaper, power, CATV, gas  31 Other (please specify)
	ON: I hereby certify that the set in accordance with Section	se above is a true, complete and on 67-6624 Idaho Code.		

Mac Men 2/7/57

Elibery signature Date